

OCT 19 2006

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To:

NAME:	FACSIMILE:	TELEPHONE:
MS Amendment U.S. Patent and Trademark Office	571-273-8300	571-272-6803

FROM: Norman R. Klivans, Jr. DATE: October 19, 2006

Number of pages with cover page:	8	
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Preparer of this slip has confirmed that facsimile number given is correct: 12496/sfh1

Comments:

Official Filing

Examiner: T. Dixon
 Art Unit: 3639
 U.S. Patent Application Serial No.: 08/977,846
 Filing Date: November 25, 1997
 Inventor: John O. RYAN
 Title: METHOD AND SYSTEM FOR INFORMATION DISSEMINATION WITH
 USER MENU INTERFACE (AS AMENDED)
 Docket No.: 549222000101

Papers enclosed herewith:

1. Transmittal - 1 page
2. Fee Transmittal + duplicate copy for fee processing - 2 pages
3. Supplemental Information Disclosure Statement - 3 pages
4. Form PTO/SB/08a/b - 1 page

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PTO/SB/21 (09-04)

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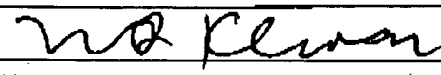
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	08/977,846
		Filing Date	November 25, 1997
		First Named Inventor	John O. RYAN
		Art Unit	3839
		Examiner Name	T. Dixon
Total Number of Pages in This Submission	7	Attorney Docket Number	549222000101

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form + duplicate copy for fee processing (2 pages) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement Supplemental (3 pages) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): Form PTO/SB/06a/b (1 page) Fax cover sheet
Remarks: _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MORRISON & FOERSTER LLP (Customer No. 25226)		
Signature			
Printed name	Norman R. Klivans		
Date	October 19, 2006	Reg. No.	33,003

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PTO/SB/17 (01-08)


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FEE TRANSMITTAL For FY 2006		Complete If Known	
		Application Number	06/977,846
		Filing Date	November 25, 1997
		First Named Inventor	John O. RYAN
		Examiner Name	T. Dixon
		Art Unit	3639
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	549222000101
TOTAL AMOUNT OF PAYMENT		(\$)	180.00

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)																					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																					
	FILING FEES		SEARCH FEES		EXAMINATION FEES																
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)														
Utility	300	150	500	250	200	100	0.00														
Design	200	100	100	50	130	65	0.00														
Plant	200	100	300	150	160	80	0.00														
Reissue	300	150	500	250	600	300	0.00														
Provisional	200	100	0	0	0	0	0.00														
2. EXCESS CLAIM FEES																					
Fee Description							Small Entity Fee (\$)														
Each claim over 20 (including Reissues)							50														
Each independent claim over 3 (including Reissues)							200														
Multiple dependent claims							360														
<table border="0"> <tr> <td><u>Total Claims</u></td> <td><u>Extra Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>30</td> <td>48</td> <td>0</td> <td>0.00</td> </tr> </table>							<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	30	48	0	0.00	<table border="0"> <tr> <td colspan="2">Multiple Dependent Claims</td> </tr> <tr> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>360.00</td> <td>0.00</td> </tr> </table>	Multiple Dependent Claims		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	360.00	0.00
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																		
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Multiple Dependent Claims																					
<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																				
360.00	0.00																				
<table border="0"> <tr> <td><u>Indep. Claims</u></td> <td><u>Extra Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>2</td> <td>0</td> <td>200.00</td> <td>0.00</td> </tr> </table>							<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	2	0	200.00	0.00							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																		
2	0	200.00	0.00																		
HP = highest number of total claims paid for, if greater than 20																					
HP = highest number of independent claims paid for, if greater than 3																					
3. APPLICATION SIZE FEE																					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																					
<u>Total Sheets</u>		<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																
- 100 =		/50	(round up to a whole number) x	250.00	=	0.00															
4. OTHER FEE(S)																					
Non-English Specification, \$130 fee (no small entity discount)																					
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement							180.00														

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	33,003
Name (Print/Type)	Norman R. Klivans	Telephone	(650) 813-5850
		Date	October 19, 2006

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Dated: October 19, 2006

Signature: _____

(Sandy Hou)

Patent

Docket No. 549222000101

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
John O. RYAN

Serial No.: 08/977,846

Filing Date: November 25, 1997

For: METHOD AND SYSTEM FOR
INFORMATION DISSEMINATION
WITH USER MENU INTERFACE (AS
AMENDED)

Examiner: T. Dixon

Group Art Unit: 3639

SUPPLEMENTAL INFORMATION DISCLOSURE
STATEMENT UNDER 37 C.F.R. § 1.97 & 1.98

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. § 1.97 and § 1.98, Applicant submits for consideration in the above-identified application the document listed on the attached Form PTO/SB/08a/b. The Examiner is requested to make this document of record. This document was also submitted in an IDS filed May 31, 2006.

This Supplemental Information Disclosure Statement is submitted:

- ☐ With the application; accordingly, no fee or separate requirements are required.
- ☐ Before the mailing of a first Office Action after the filing of a Request for Continued Examination under § 1.114. However, if applicable, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.

10/20/2006 TL0111 00000036 031952 08977846
01 FC:1806 180.00 DA

pa-1104682

Application Serial No. 08/977,846

Patent
Docket No. 549222000101

- ☐ Within three months of the application filing date or before mailing of a first Office Action on the merits; accordingly, no fee or separate requirements are required. However, if applicable, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.
- ☒ After receipt of a first Office Action on the merits but before mailing of a final Office Action or Notice of Allowance.
- ☐ A fee is required. A check in the amount of ___ is enclosed.
- ☒ A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.
- ☐ A Certification under 37 C.F.R. § 1.97(e) is provided above; accordingly; no fee is believed to be due.
- ☐ After mailing of a final Office Action or Notice of Allowance, but before payment of the issue fee.
- ☐ A Certification under 37 C.F.R. § 1.97(e) is provided above and a check in the amount of ___ is enclosed.
- ☐ A Certification under 37 C.F.R. § 1.97(e) is provided above and a Fee Transmittal form (PTO/SB/17 is attached to this submission in duplicate.)

Applicant would appreciate the Examiner initialing and returning the Form PTO/SB/08a/b, indicating that the information has been considered and made of record herein.

The information contained in this Supplemental Information Disclosure Statement under 37 C.F.R. § 1.97 and § 1.98 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal form is separated from this document and the Patent and Trademark Office determines that an extension and/or other relief (such as payment of a fee under 37 C.F.R. § 1.17 (p)) is required, Applicant petitions for any required relief including extensions of time and authorizes the Commissioner to charge the cost of such petition and/or other

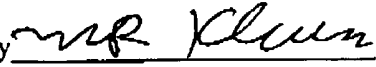
Application Serial No. 08/977,846

Patent
Docket No. 549222000101

fees due in connection with the filing of this document to Deposit Account No. 03-1952
referencing 549222000101.

Dated: October 19, 2006

Respectfully submitted,

By 
Norman R. Klivans
Registration No.: 33,003
MORRISON & FOERSTER LLP
755 Page Mill Road
Palo Alto, California 94304-1018
(650) 813-5850

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ALTERNATIVE TO PTO/SB/08a/b (07-05)

Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Complete if Known	
				Application Number	08/977,846
				Filing Date	November 25, 1997
				First Named Inventor	John O. RYAN
				Art Unit	3639
				Examiner Name	T. Dixon
Sheet	1	of	1	Attorney Docket Number	549222000101

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	1.	US-5,404,505-A	04-04-1995	Levinson	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ² -Number ³ -Kind Code ⁴ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁵

*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinda Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS				
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²	

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¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature		Date Considered	
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